## **B22C** (Official Form 22C) (Chapter 13) (04/10)

In re	Mark Shea	According to the calculations required by this statement:
	Debtor(s)	The applicable commitment period is 3 years.
Case N	umber:	The applicable commitment period is 5 years.
	(If known)	Disposable income is determined under § 1325(b)(3).
		Disposable income is not determined under § 1325(b)(3).
		(Check the boxes as directed in Lines 17 and 23 of this statement.)

## CHAPTER 13 STATEMENT OF CURRENT MONTHLY INCOME AND CALCULATION OF COMMITMENT PERIOD AND DISPOSABLE INCOME

In addition to Schedules I and J, this statement must be completed by every individual chapter 13 debtor, whether or not filing jointly. Joint debtors may complete one statement only.

ı	Par	rt I.	REPORT OF INC	COME							
1	b. Married. Complete both Column A ("Debtor's Income") and Column B ("Spouse's Income") for Lines 2-10.										
	All figures must reflect average monthly income recalendar months prior to filing the bankruptcy case the filing. If the amount of monthly income varied six-month total by six, and enter the result on the approximately	e, en	nding on the last day ring the six months,	of the month before		Column A  Debtor's Income	Column B Spouse's Income				
2	Gross wages, salary, tips, bonuses, overtime, con	nmi	issions.		\$	12,115.90	\$				
3	Income from the operation of a business, profess enter the difference in the appropriate column(s) of profession or farm, enter aggregate numbers and pr number less than zero. Do not include any part of a deduction in Part IV.	f Li ovi	ne 3. If you operate de details on an atta	more than one business, achment. Do not enter a							
			Debtor	Spouse							
	a. Gross receipts	\$	0.00								
	b. Ordinary and necessary business expenses c. Business income	\$	0.00 obtract Line b from		\$	0.00	¢				
	Rents and other real property income. Subtract l				Ф	0.00	<b>D</b>				
4	the appropriate column(s) of Line 4. Do not enter a part of the operating expenses entered on Line b  a. Gross receipts	a nı	amber less than zero a deduction in Par Debtor 0.00	o. Do not include any tt IV.  Spouse							
	b. Ordinary and necessary operating expenses c. Rent and other real property income	_	ubtract Line b from		\$	0.00	\$				
	<u> </u>	D	donact Ellie o from	Line a	<u> </u>						
5	Interest, dividends, and royalties.				\$	0.00	\$				
6	Pension and retirement income.				\$	0.00	\$				
7	Any amounts paid by another person or entity, o expenses of the debtor or the debtor's dependent purpose. Do not include alimony or separate main	ts, i	ncluding child sup	port paid for that							
	debtor's spouse.			mounts para by the	\$	0.00	\$				
8		in thens ens e an	ation received by yo	mn(s) of Line 8. ou or your spouse was a pensation in Column A	\$	0.00					
8	debtor's spouse.  Unemployment compensation. Enter the amount i However, if you contend that unemployment compensation under the Social Security Act, do not list the or B, but instead state the amount in the space belo Unemployment compensation claimed to	in the ensure are are are are are are are are are a	0.00 Sport include all other paymeterized under the Spainst humanity, or a specific product of the spainst humanity, or a specific product of the spainst humanity.	mn(s) of Line 8. Du or your spouse was a bensation in Column A  ouse \$ y, list additional sources or separate ments of alimony or docial Security Act or as a victim of							
	debtor's spouse.  Unemployment compensation. Enter the amount i However, if you contend that unemployment compensation that unemployment compensation that unemployment compensation claimed to be a benefit under the Social Security Act. Debtor  Unemployment compensation claimed to be a benefit under the Social Security Act  Income from all other sources. Specify source an on a separate page. Total and enter on Line 9. Domaintenance payments paid by your spouse, but separate maintenance. Do not include any benefit payments received as a victim of a war crime, crime	in the ensure are are are are are are are are are a	0.00 Sponount. If necessary tinclude alimony of elude all other paymeterized under the Spainst humanity, or a Debtor	mn(s) of Line 8. Du or your spouse was a pensation in Column A  ouse \$ y, list additional sources or separate ments of alimony or docial Security Act or							

10	Subtotal. Add Lines 2 thru 9 in Column A, and, if Column B is completed, add Lines 2 through 9 in Column B. Enter the total(s).  \$\\$\\$ 12,115.9\$	90	\$	
11	<b>Total.</b> If Column B has been completed, add Line 10, Column A to Line 10, Column B, and enter the total. If Column B has not been completed, enter the amount from Line 10, Column A.	\$ 12,115.		
	Part II. CALCULATION OF § 1325(b)(4) COMMITMENT PERIOD			
12	Enter the amount from Line 11	\$	12,115.90	
13	Marital Adjustment. If you are married, but are not filing jointly with your spouse, AND if you contend that calculation of the commitment period under § 1325(b)(4) does not require inclusion of the income of your spouse, enter on Line 13 the amount of the income listed in Line 10, Column B that was NOT paid on a regular basis for the household expenses of you or your dependents and specify, in the lines below, the basis for excluding this income (such as payment of the spouse's tax liability or the spouse's support of persons other than the debtor or the debtor's dependents) and the amount of income devoted to each purpose. If necessary, list additional adjustments on a separate page. If the conditions for entering this adjustment do not apply, enter zero.  a. \$ b. \$ b. \$			
	c. \$ Total and enter on Line 13	¢.	0.00	
14	Subtract Line 13 from Line 12 and enter the result.	\$	0.00	
14		\$	12,115.90	
15	Annualized current monthly income for § 1325(b)(4). Multiply the amount from Line 14 by the number 12 and enter the result.	\$	145,390.80	
16	<b>Applicable median family income.</b> Enter the median family income for applicable state and household size. (This information is available by family size at <a href="www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court.)			
	a. Enter debtor's state of residence: CA b. Enter debtor's household size: 1	\$	47,969.00	
17	Application of § 1325(b)(4). Check the applicable box and proceed as directed.  The amount on Line 15 is less than the amount on Line 16. Check the box for "The applicable commitment portop of page 1 of this statement and continue with this statement.  The amount on Line 15 is not less than the amount on Line 16. Check the box for "The applicable commitme at the top of page 1 of this statement and continue with this statement.			
	Part III. APPLICATION OF § 1325(b)(3) FOR DETERMINING DISPOSABLE INCOME			
18	Enter the amount from Line 11.	\$	12,115.90	
19	Marital Adjustment. If you are married, but are not filing jointly with your spouse, enter on Line 19 the total of any income listed in Line 10, Column B that was NOT paid on a regular basis for the household expenses of the debtor or the debtor's dependents. Specify in the lines below the basis for excluding the Column B income(such as payment of the spouse's tax liability or the spouse's support of persons other than the debtor or the debtor's dependents) and the amount of income devoted to each purpose. If necessary, list additional adjustments on a separate page. If the conditions for entering this adjustment do not apply, enter zero.    a.			
	Total and enter on Line 19.	\$	0.00	
20	Current monthly income for § 1325(b)(3). Subtract Line 19 from Line 18 and enter the result.	\$	12,115.90	
21	<b>Annualized current monthly income for § 1325(b)(3).</b> Multiply the amount from Line 20 by the number 12 and enter the result.	\$	145,390.80	
22	Applicable median family income. Enter the amount from Line 16.	\$	47,969.00	
23	Application of § 1325(b)(3). Check the applicable box and proceed as directed.  ☐ The amount on Line 21 is more than the amount on Line 22. Check the box for "Disposable income is determ 1325(b)(3)" at the top of page 1 of this statement and complete the remaining parts of this statement.  ☐ The amount on Line 21 is not more than the amount on Line 22. Check the box for "Disposable income is no 1325(b)(3)" at the top of page 1 of this statement and complete Part VII of this statement. Do not complete Part	ot de	termined under §	

24A Enter appli banks  Natio Out-c Out-c www house 65 ye 16b.)  24B Line result  Hou a1.  b1.  c1.  25A Utilit avail:  Mont the real b.  c.  Loca exper regar Chec	Enter i	Part IV. Ca	ALCULATION (	OF D	DEDUCTIONS FR	ROM INCOME			
24A Enter appli banks  Natio Out-c Out-c www house 65 ye 16b.)  24B Line result  Hou a1.  b1.  c1.  25A Utilit avail:  Mont the result words avail:  Mont c.  Loca Loca Conte Stand conte seper regar Chec	Enter i	Subpart A: D	eductions under Star	ndaro	ds of the Internal Rev	enue Service (IRS)			
24B Coca	Janua	National Standards: food, apparel and services, housekeeping supplies, personal care, and miscellaneous.  Enter in Line 24A the "Total" amount from IRS National Standards for Allowable Living Expenses for the applicable household size. (This information is available at <a href="www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court.)							
25A Loca Utility avails  Loca Hous avails Mont the re a. b. c.  Loca 25B Stand conte  Loca expering ar Chec	National Standards: health care. Enter in Line a1 below the amount from IRS National Standards for Out-of-Pocket Health Care for persons under 65 years of age, and in Line a2 the IRS National Standards for Out-of-Pocket Health Care for persons 65 years of age or older. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) Enter in Line b1 the number of members of your household who are under 65 years of age, and enter in Line b2 the number of members of your household who are 65 years of age or older. (The total number of household members must be the same as the number stated in Line 16b.) Multiply Line a1 by Line b1 to obtain a total amount for household members under 65, and enter the result in								
25A Utilit avail:  Loca Hous avail:  Mont the re a. b. c.  Loca 25B Stanc conte  Loca exper regar Chec	House	ehold members under 65 y	years of age	Hou	sehold members 65 year	s of age or older			
25A Utiliti avail:  Loca Hous avail:  Mont the real a. b.  26 Stand conter regar Chec	a1.	Allowance per member	60	a2.	Allowance per member	144			
25A Loca Utilita availa Loca Hous availa Mont 25B the re a. b. c. Loca 25B Stand conte  Loca expering are regar Chec	b1.	Number of members	1	b2.	Number of members	0			
25A Utilita availa Loca Hous availa Mont the real a. b. C. Loca 25B of Stand conter Loca experiegar Chec	c1.	Subtotal	60.00	c2.	Subtotal	0.00	\$	60.00	
Hous avails Mont the re a. b. c. Loca 25B Stand contes Check	Utilitie	Standards: housing and us Standards; non-mortgage ele at www.usdoj.gov/ust/ o	expenses for the applic	able c	ounty and household size		\$	585.00	
Loca experiegar Chec	<b>Local Standards: housing and utilities; mortgage/rent expense.</b> Enter, in Line a below, the amount of the IRS Housing and Utilities Standards; mortgage/rent expense for your county and household size (this information is available at <a href="www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court); enter on Line b the total of the Average Monthly Payments for any debts secured by your home, as stated in Line 47; subtract Line b from Line a and enter the result in Line 25B. <b>Do not enter an amount less than zero.</b>								
Loca 25B o Stand conte  Loca expering regar Chec									
26 Stand conte		Net mortgage/rental expen			Subtract Line b f	from Line a.	\$	0.00	
exper regar Chec	Local Standards: housing and utilities; adjustment. If you contend that the process set out in Lines 25A and 25B does not accurately compute the allowance to which you are entitled under the IRS Housing and Utilities Standards, enter any additional amount to which you contend you are entitled, and state the basis for your contention in the space below:								
exper regar Chec								0.00	
Trans Stand		Local Standards: transportation; vehicle operation/public transportation expense. You are entitled to an expense allowance in this category regardless of whether you pay the expenses of operating a vehicle and regardless of whether you use public transportation.  Check the number of vehicles for which you pay the operating expenses or for which the operating expenses are included as a contribution to your household expenses in Line 7. \[ \] 0 \[ \] 1 \[ \] 2 or more.  If you checked 0, enter on Line 27A the "Public Transportation" amount from IRS Local Standards: Transportation. If you checked 1 or 2 or more, enter on Line 27A the "Operating Costs" amount from IRS Local Standards: Transportation for the applicable number of vehicles in the applicable Metropolitan Statistical Area or Census Region. (These amounts are available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.)							
27B for a your	expens regardl Check include If you Transp Standa	Census Region. (These amounts are available at <a href="www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court.)  Local Standards: transportation; additional public transportation expense. If you pay the operating expenses for a vehicle and also use public transportation, and you contend that you are entitled to an additional deduction for							

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	Local Standards: transportation ownership/lease expense; Vehicle you claim an ownership/lease expense. (You may not claim an owner vehicles.)					
28	Enter, in Line a below, the "Ownership Costs" for "One Car" from the (available at <a href="www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy Monthly Payments for any debts secured by Vehicle 1, as stated in Li the result in Line 28. <b>Do not enter an amount less than zero.</b>					
	a. IRS Transportation Standards, Ownership Costs	\$ 0.00				
	Average Monthly Payment for any debts secured by Vehicle b. 1, as stated in Line 47	\$ 0.00				
	c. Net ownership/lease expense for Vehicle 1	Subtract Line b from Line a.	\$	0.00		
29	Local Standards: transportation ownership/lease expense; Vehicle the "2 or more" Box in Line 28.  Enter, in Line a below, the "Ownership Costs" for "One Car" from the (available at <a href="www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy Monthly Payments for any debts secured by Vehicle 2, as stated in Li the result in Line 29. Do not enter an amount less than zero.	e IRS Local Standards: Transportation court); enter in Line b the total of the Average ne 47; subtract Line b from Line a and enter				
	a. IRS Transportation Standards, Ownership Costs	\$ 0.00				
	Average Monthly Payment for any debts secured by Vehicle b. 2, as stated in Line 47	\$ 0.00				
	c. Net ownership/lease expense for Vehicle 2	Subtract Line b from Line a.	\$	0.00		
30	Other Necessary Expenses: taxes. Enter the total average monthly e state, and local taxes, other than real estate and sales taxes, such as in security taxes, and Medicare taxes. Do not include real estate or sale	come taxes, self employment taxes, social	\$	3,541.87		
31	Other Necessary Expenses: mandatory deductions for employment. Enter the total average monthly payroll deductions that are required for your employment, such as mandatory retirement contributions, union dues, and uniform costs. Do not include discretionary amounts, such as voluntary 401(k) contributions.					
32	Other Necessary Expenses: life insurance. Enter total average monthly premiums that you actually pay for term					
33	Other Necessary Expenses: court-ordered payments. Enter the tot pay pursuant to the order of a court or administrative agency, such as include payments on past due obligations included in line 49.		\$	1,962.00		
34	Other Necessary Expenses: education for employment or for a phythe total average monthly amount that you actually expend for educat education that is required for a physically or mentally challenged depproviding similar services is available.	ion that is a condition of employment and for	\$	0.00		
35	Other Necessary Expenses: childcare. Enter the total average mont childcare - such as baby-sitting, day care, nursery and preschool. <b>Do</b>		\$	0.00		
36	Other Necessary Expenses: health care. Enter the average monthly amount that you actually expend on health care that is required for the health and welfare of yourself or your dependents, that is not reimbursed by insurance or paid by a health savings account, and that is in excess of the amount entered in Line 24B. Do not include payments for health insurance or health savings accounts listed in Line 39.					
37	Other Necessary Expenses: telecommunication services. Enter the total average monthly amount that you actually pay for telecommunication services other than your basic home telephone and cell phone service - such as pagers, call waiting, caller id, special long distance, or internet service-to the extent necessary for your health and welfare or that of your dependents. Do not include any amount previously deducted.					
38	Total Expenses Allowed under IRS Standards. Enter the total of L	ines 24 through 37.	\$	7,942.46		
	Subpart B: Additional Living Note: Do not include any expenses that	, <u>-</u>				

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	the ca	th Insurance, Disability Insurance, and I ategories set out in lines a-c below that are adents.				
39	a.	Health Insurance	\$	280.58		
	b.	Disability Insurance	\$	0.00		
	c.	Health Savings Account	\$	0.00		
	Total	and enter on Line 39			\$	280.58
	If you below	u do not actually expend this total amounty:	<b>nt,</b> state your actual total	average monthly expenditures in the spa	ce	
40	exper ill, or	inued contributions to the care of houselesses that you will continue to pay for the redisabled member of your household or manses. Do not include payments listed in L	easonable and necessary ember of your immediate	care and support of an elderly, chronicall	y \$	0.00
41	Prote actua appli	er \$	0.00			
42	Stand trust	e energy costs. Enter the total average molards for Housing and Utilities, that you ace with documentation of your actual expect is reasonable and necessary.	tually expend for home of	nergy costs. You must provide your ca	se \$	0.00
43	actua schoo <b>docu</b>	ration expenses for dependent children urally incur, not to exceed \$147.92 per child, of by your dependent children less than 18 mentation of your actual expenses, and y ssary and not already accounted for in the	for attendance at a priva years of age. You must j you must explain why the	e or public elementary or secondary provide your case trustee with	\$	0.00
44	Stand or fro	tional food and clothing expense. Enter the sess exceed the combined allowances for follards, not to exceed 5% of those combined om the clerk of the bankruptcy court.) You mable and necessary.	ood and clothing (appare allowances. (This inform	l and services) in the IRS National nation is available at www.usdoj.gov/ust/		0.00
45	contr	ritable contributions. Enter the amount regibutions in the form of cash or financial in (2)(1)-(2). <b>Do not include any amount in e</b>	struments to a charitable	organization as defined in 26 U.S.C. §	\$	40.00
46	Total	Additional Expense Deductions under §	707(b). Enter the total	of Lines 39 through 45.	\$	320.58

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			Subpart C: Deductions for 1	Debt 1	Payment			
47	own, check sched case,	list the name of creditor, ide whether the payment includ- uled as contractually due to	ims. For each of your debts that is secuntify the property securing the debt, states taxes or insurance. The Average Moteach Secured Creditor in the 60 months list additional entries on a separate page.	te the Anthly Postfollow	verage Monthly ayment is the to ring the filing of	Payment, and tal of all amounts the bankruptcy		
		Name of Creditor	Property Securing the Debt		Average Monthly Payment	Does payment include taxes or insurance		
	a.	HomEq Servicing	Permanent Residence 7 Chaudhary Court Napa, CA 94558	\$	4,294.96	∐yes <b>∑</b> no		
					otal: Add Lines		\$	4,294.96
48	your of payments	vehicle, or other property n deduction 1/60th of any amo ents listed in Line 47, in orde in default that must be paid	ns. If any of debts listed in Line 47 are ecessary for your support or the support unt (the "cure amount") that you must per to maintain possession of the propert in order to avoid repossession or foreclaist additional entries on a separate page.  Property Securing the Debt	t of you bay the y. The osure. I	or dependents, you creditor in addit cure amount wo list and total any	ou may include in ion to the uld include any	3]	
	a.	-NONE-	Property Securing the Debt		\$	ne Cure Amount		
						Total: Add Lines	\$	0.00
49	priori not ir	ty tax, child support and alin iclude current obligations,	y claims. Enter the total amount, dividence on y claims, for which you were liable such as those set out in Line 33.	at the ti	me of your bank	cruptcy filing. Do	\$	37.08
	<b>Chapter 13 administrative expenses.</b> Multiply the amount in Line a by the amount in Line b, and enter the resulting administrative expense.							
50	<ul><li>a. Projected average monthly Chapter 13 plan payment.</li><li>b. Current multiplier for your district as determined under schedules</li></ul>					300.00		
	b.	issued by the Executive C	office for United States Trustees. (This twww.usdoj.gov/ust/ or from the clerk			9.50		
	c.	1 1	trative expense of Chapter 13 case	То	tal: Multiply Li	nes a and b	\$	28.50
51	Total	<b>Deductions for Debt Paym</b>	ent. Enter the total of Lines 47 through	h 50.			\$	4,360.54
			Subpart D: Total Deduction	s fron	1 Income			
52	Total	of all deductions from inco	ome. Enter the total of Lines 38, 46, an	d 51.			\$	12,623.58
	•	Part V. DETERN	MINATION OF DISPOSABLE	E INC	OME UNDI	ER § 1325(b)(2	2)	
53	Total	current monthly income.	Enter the amount from Line 20.				\$	12,115.90
54	paym	ents for a dependent child, re	nly average of any child support payme eported in Part I, that you received in accessary to be expended for such child.				\$	0.00
55	wages		Enter the monthly total of (a) all amound retirement plans, as specified in § 54 ecified in § 362(b)(19).				f  \$	389.53
56	Total	of all deductions allowed u	under § 707(b)(2). Enter the amount fr	om Lin	e 52.		\$	12,623.58
ــــــــــــــــــــــــــــــــــــــ			a distribution of the same of	23.11			Ψ	,0_0.00

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	there is no real If necessary, provide your	asonable alternative, describe the special c list additional entries on a separate page. T	cial circumstances that justify additional expenses for whire the circumstances and the resulting expenses in lines a-c below the control of the expenses and enter the total in Line 57. You not be expenses and you must provide a detailed explanation necessary and reasonable.	ow. nust		
57	Nature	e of special circumstances	Amount of Expense			
	a.		\$			
	b.		\$			
	c.		\$   Total: Add Lines		0.00	
58	Total adjustr	ments to determine disposable income. A	Add the amounts on Lines 54, 55, 56, and 57 and enter t		13,013.11	
59	Monthly Dis	posable Income Under § 1325(b)(2). Sub	btract Line 58 from Line 53 and enter the result.	\$	-897.21	
		Part VI. ADDIT	TONAL EXPENSE CLAIMS			
	of you and you 707(b)(2)(A)	our family and that you contend should be	ses, not otherwise stated in this form, that are required for an additional deduction from your current monthly income on a separate page. All figures should reflect your average.	me under §		
60	Expen	se Description	Monthly Amo	ount		
	a.		\$			
	b.		\$			
	c. d.		\$   \$			
	u.	Total: Ac	dd Lines a, b, c and d \$			
		Part V	VII. VERIFICATION			
	I declare und	er penalty of perjury that the information p	provided in this statement is true and correct. (If this is a	a joint case,	both debtors	
		D	0' / /3.5 1.01			
61		Date: <b>June 7, 2010</b>	Signature: /s/ Mark Shea  Mark Shea			

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